

(12) UK Patent (19) GB (11) 2 153 223 (13) B

(54) Title of invention

Composition for percutaneously administering metoclopramide

(51) INT CL4; A61K 47/00 (A61K 47/00 31/16 31/23 31/045)

- (21) Application No 8430458
- (22) Date of filing 3 Dec 1984
- (30) Priority data
 - (31) 576087
 - (32) 1 Feb 1984
 - (33) United States of America (US)
- (43) Application published 21 Aug 1985
- (45) Patent published 24 Jun 1987
- (52) Domestic classification (Edition I) A5B 401 402 406 40Y 431 43Y 480 482 48Y 490 491 49Y 503 50Y 541 54Y 565 566 567 56Y 586 58Y J U1S 1330 A5B
- (56) Documents cited None
- (58) Field of search **A58**

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COMPOSITION FOR PERCUTANEOUSLY ADMINISTERING METOCLOPRAMIDE

The present invention relates to a method for accelerating the percutaneous absorption of metoclopramide (hereafter often merely referred to as MCP for brevity).

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Orugs are commonly administered to the skin or mucosal tissues to treat local problems and systemic administration of drugs is commonly accomplished by ingesting pills or by injections. However, recently attempts have been made to achieve systemic administration of drugs by topical applications to the skin or mucosal tissues. Such topical means of achieving systemic administration has the advantage that desired blood levels can be readily achieved and maintained so that duration of therapy can be readily controlled. Thus, side effects due to an overdose of the drug can be prevented. Also, metabolism due to a first pass through the liver and gastric disturbances, which are characteristic of certain drugs such as indomethacin when administered orally, can also be prevented.

However, normal skin is relatively impermeable to most drugs, so that desired blood levels of the therapeutic agent cannot be achieved by means of percutaneous absorption. The percutaneous absorption of drugs can, however, be enhanced by means of adjuvants or penetration enhancers.

One of the best known of such penetrating adjuvants is dimethyl sulfoxide, the use of which is described in detail in U.S. Patent 3,551,554 (Herschler et al).

British Patent 1,504,302 (Brooker et al) deals with sedative methods and compositions and disclosures the administration of sedatives by applying to the skin of a non-human animal a sedating amount of one or more sedative compounds in various penetrating adjuvants such as hydrocarbons such as aromatic hydrocarbons or paraffins, halogenated aliphatic hydrocarbons, ketones, esters, ethers, alcohols, amides or sulfones.

U.S. Patent 4,202,888 (Eckert et al) discloses asorbable pharmaceutical compositions comprising at least one

cardiac glycoside distributed in a vehicle comprising an absorption-enhancing amount of at least a partial glyceride of a fatty acid of medium chain length.

U.S. Patent 3,472,931 (Stoughton) relates to percutaneous absorption using lower alkyl amides, and exemplifies binary systems which comprise dimethylacetamide and ethanol, dimethylacetamide and isopropyl alcohol and dimethylacetamide and isopropyl palmitate.

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- U.S. Patent 3,969,516 (Stoughton) discloses compositions for the treatment of acne which broadly can include "conventional formulating ingedients" including materials which enhance the percutaneous absorption of antibiotics of the lincomycin family, e.g., N-lower alkyl 2-pyrrolidones. Stearyl alcohol is used in the examples. This is a solid at 38°C and would be inoperable in the present invention.
- U.S. Patent 3,989,816 (Rajadhyakshn) disloses percutaneous absorption systems for pyrrolidone-type compounds, including, e.g., in Example 3 isopropyl myristate, without any disclosure of the purpose of its inclusion. While stearyl and cetyl alcohol are disclosed, these are solids at 38°C and are inoperable in the present invention. Further, the pyrrolidone-type compounds used in the examples have a C8 group corresponding to R5 of the solvents of the present invention, which renders them useless in the present invention.
 - U.S. Patent 4,017,641 (DiGiulio) discloses skin moisturizing compositions (emulsions) containing 2-pyrrolidone. Stearyl and cetyl alcohol (solids at 38°C) are disclosed as useful components. DiGiulio also broadly discloses the use of certain esters of lanolin fatty acids, certain straight chain fatty alcohols or straight chain fatty alcohols.

European Patent Application 0043738 discloses binary percutaneous administration systems which comprise a monoglyceride, a diol or a diol ether in combination with a

second component such as an alcohol, ester, amide or the like.

The present invention involves multicomponent carrier systems for the percutaneous administration of metoclopramide which differ from the systems disclosed in the above prior art.

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In the present invention, it has been discovered that certain adjuvant-solvent systems provide enhanced and controlled percutaneous administration of metoclopramide (free base) and/or pharmaceutically acceptable salts thereof.

According to the invention we provide a pharmaceutical composition suitable for percutaneous administration, which comprises metoclopramide dissolved in a carrier system which comprises a mixture liquid at below 38°C, of

- (a) at least one monovalent alcohol ester of an aliphatic monocarboxylic acid which ester has 8 to 32 carbon atoms, wherein the carboxylic acid moiety must have at least one unsaturated bond and/or at least one branched chain if the moiety has 18 or more carbon atoms, an alphatic mono-20 alcohol having 6 to 24 carbon atoms and which must contain at least one unsaturated bond and/or at least one branched chain if it has 14 or more carbon atoms, or a mixture thereof,
- (b) at least one N-cyclic compound of the general formula 25

$$R_5 - N$$

$$(CH_2)$$
 n

wherein R₅ represents a hydrogen atom or an alkyl group having 1 to 4 carbon atoms, R₆ represents an alkyl group having 1 to 4 carbon atoms and \underline{n} is 3, 4 or 5.

We consider the N-cyclic compounds (b) to basically serve a solvent function and the esters and/or alcohols (a) to serve as adjuvants which enhance the solvating function of the solvent. We further believe that the solvents carry the active agent whereas the adjuvants open up the stratum corneum. We do not wish to be bound by these theories, and we merely use the terminology "solvent" and "adjuvant" to maintain a line of distinction between the two classes of materials which are used.

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Mixtures of the esters and alcohols (a) may be used, as may mixtures of the N-cyclic type compounds (b). It is necessary that the alcohols, esters and pyrrolidone-type compounds have a melting point below 38°C, i.e., be liquid at 38°C. Of course, the final compositions of the present invention which are used for percutaneous administration must also be liquid at below 38°C.

In the present invention, metoclopramide can be percutaneously administered by blending it with the adjuvant(s) and solvent(s) and applying the mixture to the skin.

The above described composition can be used as bases for medical preparations comprising active agents applicable to the outer skin.

The composition of the present invention can enhance the percutaneous permeability absorption of metoclopramide, so that it can be administered in a rapid and controlled manner in man or other animals.

By application at appropriately adjusted rates, relatively constant therapeutic blood levels of metoclo-pramide can thus be obtained so as to avoid the side effects and reduced therapeutic effects that may result from wide fluctuations thereof in blood levels over time.

The adjuvants (a) used can be monovalent alcohol esters of aliphatic monocarboxylic acids having a total number of carbon atoms of from 8 to 32. (Diesters do not provide the results of the present invention). The esters are conveniently represented by the formula $R_1 \, \text{COOR}_2$, R_1 representing the acid moiety and R_2 representing the alcohol moiety. The total number of carbon atoms in R_1 and R_2 can be from 7 to 31.

As the alcohol moiety, monovalent alcohols having 1 to 20 carbon atoms such as methyl alcohol, ethyl alcohol, n-propyl alcohol, isopropyl alcohol, n-butyl alcohol, isopropyl alcohol, n-butyl alcohol, and oleyl butyl alcohol, decyl alcohol, tetradecyl alcohol and oleyl alcohol are preferred. Further, as the monocarboxylic acid moiety, fatty acids having 2 to 20 carbon atoms are preferred and fatty acids having 2 or 8 to 18 carbon atoms are most preferred. Specific examples of such esters include methyl laurate, ethyl laurate, butyl laurate, isopropyl myristate, decyl oleate, myristyl acetate and cetyl acetate.

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If the carboxylic acid moiety in the ester has 18 or more carbon atoms, the alcohol and/or carboxylic acid moiety must have at least one unsaturated bond and/or at least one branched chain to render the same liquid. In this situation it is preferred that the alcohol moiety have at least two carbon atoms, preferably more than two carbon atoms.

The presence of only one unsaturated bond is sufficient; the maximum number of unsaturated bonds is not limited. Similarly, the presence of only one branched methyl group is sufficient; the maximum number of carbon atoms in the branch(es) is not limited.

Higher aliphatic monoalcohols having from 6 to 24 carbon atoms may be branched, straight chain, saturated or unsaturated and may be primary, secondary or tertiary.

If the alcohol has 14 or more carbon atoms, it must contain at least one unsaturated bond and/or at least one branched chain to render the same liquid. The presence of only one unsaturated bond is sufficient; the maximum number unsaturated bonds is not limited. Similarly, the presence of only one branched methyl group is sufficient; the maximum number of carbon atoms in the branch(es) is not limited.

The solvents (b) are compounds represented by the general formula (I) as defined above. Examples of an alkyl group R_5 or R_6 which may be straight chain or branched are methyl, ethyl, n-propyl and iso-propyl. It is preferred

that \underline{n} be 3 or 4, and it is most preferred that \underline{n} be 3 since unexpectedly superior results are achieved (see Example 2).

Specific examples thereof include 2-pyrrolidone, N-methylpyrrolidone, N-methylpiperidone, caprolactam and N-methylcaprolactam.

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It is mandatory that the adjuvant(s) and solvent(s) in the present invention both be present to achieve the synergistic effects of the present invention, as is shown by Example 8 herein below.

If desired, a C_3 to C_6 diol can be added to control (moderate) the rate of percutaneous metoclopramide administration, this is referred to herein as a "diol moderator". The diol can be straight or branched chain and the diol selected is preferably a diol comprising 3 to 6 carbon atoms.

The amount of any diol moderator used is not unduly limited, but is typically of the order of about 10 to about 400 weight percent, more preferably about 25 to about 200 weight percent, based on the weight of the solvent. The resulting combination of materials must, of course, be liquid.

The diol moderator reduces the activity of the adjuvant of the present invention and this provides a means of further controlling the rate of metoclopramide absorption.

Greater amounts of diol moderator decrease the rate of metoclopramide flux while lesser amounts of diol moderator increase the rate of metoclopramide flux as compared to greater amounts.

It is to be understood that the diol moderator does not enhance percutaneous absorption in the present invention, rather, in all amounts it reduces the rate of percutaneous absorption, which effect has not been hitherto suspected.

The compositions of the present invention may be prepared by dissolving the metaclopramide in the adjuvant or solvent or mixture thereof, and then mixing the dial moderator therein if it is used. The order of mixing is

from 0.5 to 95% by weight based on the total weight of adjuvant plus solvent plus metoclopramide, preferably 1 to 90% by weight same basis, the amount of solvent used; being, accordingly, from 99.5 to 5% by weight, preferably 99 to 10% by weight, same basis. Preferred proportions of diol moderator have earlier been given. Of course, pharmaceutically acceptable additive such as water, etc., can also be added to the base compositions.

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The amount of metoclopramide blended is sufficient if it is effective for achieving the desired pharmaceutical effect, which varies depending upon the body weight of the patient, symptoms, etc. The amount may thus be suitably chosen depending upon these conditions. In general, it is preferred that metoclopramide be employed in an amount of 0.1 to 60% by weight, more preferably 0.5 to 35% by weight, based on the weight of adjuvant plus solvent.

The dose of the metoclopramide administered can be controlled by increasing or decreasing the area of skin to which the pharmaceutical compositions are applied. Accordingly, the amount thereof is not necessarily limited to the above described amounts.

In the accompanying drawing:

the figure shows the effect of increasing the concentration of the metoclopramide HCl in a mixture of 25% 1-dodecanol and 1-methyl-2-pyrrolidone on the metoclopramide flux.

As will be apparent, with increasing concentrations of metoclopramide increasing amounts thereof will be absorbed by the subject. The following discussion is given in terms of blood levels of drug (ng/ml of plasma), this being dependent upon the total area of dermal application, as there is a substantially linear increase in amount of active agent absorbed with area.

For a constant area of application and a constant absolute amount of adjuvent, the blood level of metoclopramide at any given time is a function of the concentration of the same in the composition. That is, increased concen-

trations of metoclopramide in the formulation result in more rapid metoclopramide penetration and higher blood levels.

A further factor which must be considered is that the amount of metoclopramide absorbed will depend on the site of application, for example, scalp, ventral forearm, behind the ear, chest, etc. Typically an area rich in blood vessels is selected.

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For most applications, the amount of metoclopramide applied will be about 0.1 to 100 mg per cm^2 and the total area of application will be of the order of about 0.5 cm² to about 100 cm2, which will provide therapeutic blood levels of the metoclopramide. These ranges are not, however, limitative.

In general, the rate of transepidermal metoclopramide absorption will approach the rate of oral absorption depending upon the factors previously discussed (nature and amount of adjuvent and solvent, concentration of metoclopramide in the formulation, and surface area of skin application). Thus, peak blood levels of the metoclopramide may be reached more slowly or at about the same rate and will reach about the same level as those obtained by oral administration. Alternatively, the blood levels of metoclopramide attained by single dose intravenous administration may be maintained for an extended period by subsequent percutaneous admini-25 stration of the metoclopramide. In the latter case, the initial i.v. dose may be smaller than the normal therapeutic i.v. dose so that side effects associated with the higherthan-minimal therapeutic blood levels attained by a reduced i.v. dose may be maintained by the subsequent transepidermal 30 administration at a proper rate.

The method of the present invention finds application with mammals in general, most particularly man and domestic animals such as cows, sheep, horses, dogs and cats.

The pharmaceutical composition of the present invention is administered to the outer skin as a simple mixture or as a medical preparation by adding known pharmaceutically

acceptable third components in the form of solutions, ointments (paste-including creams and gels), lotions, adhesive: tapes, a plaster, etc.

For example, solutions may simply comprise metoclopramide agent dissolved in the adjuvant and solvent with optional components, e.g., glycerin, etc,. and the solutions may be incorporated into absorbants, e.g. gauze, or a porous membrane, etc.

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Ointments, gels or creams may contain conventional ingredients (e.g., polyethylene oxide) to form the same, and the same may be spread onto backing materials, e.g. a plastic film.

Similarly, plasters or adhesives tapes may contain the metoclopramide, adjuvent and solvent in an adhesive base, e.g., acrylic copolymers or other synthetic gums.

In a further preferred form of the invention a cellulosic gelling agent is present, typically a hydroxy-alkylcellulose, e.g., hydroxyethylcellulose, hydroxyproyl-cellulose, hydroxypropylmethylcellulose, etc., generally in an amount of 1 to 10 wt% based on the weight of adjuvant plus solvent. The resulting gel is conveniently carried on a support.

The above listed components should essentially be inert in the system and not increase the effect of the adjuvant.

In developing the present invention, we used both diffusion cells and an animal model. The diffusion cell methods provided a qualitative assessment of the metoclopramide/adjuvant effect on percutaneous absorption. The animal model rhesus monkey test also provides an acceptable pharmacokinetic model for man as indicated in J. Soc. Cosmet Chem., 30, 297-307. Sept./Oct. 1979 and Toxicol. Appl. Pharmacol., 32, 394-398, 1975.

Hereafter, metoclopramide is generally referred to as "MCP". Examples of useful pharmaceutically acceptable salts include the HCl or di HCl salts, etc.

- 10 -

EXPERIMENTAL

<u>In Vitro</u> Skin Penetration Studies with Diffusion Cell Technique

Rat full thickness skins were used in the diffusion cell method of Michaels, AlChE Journal, 21 [5], 985-9962 (1975). The rat skin was mounted in the diffusion cell in a vertical position between the upstream and the downstream compartments; the exposed area of the skin approximated 4.15 cm².

The skin was excised from the shaved abdominal site of male albino rats weighing 250 - 300 g, and washed with normal saline solution after the subcutaneous fat was carefully removed with scissors.

An MCP solution of known concentration was added to the upper compartment of the cell, which was exposed to the epithelial side of the skin and a normal saline solution was placed in the lower compartment.

The penetration rate was studied in a thermostated bath at 30°C. At appropriate intervals samples were with-20 drawn from the lower compartment and subsequently analyzed for MCP concentration by standard analytical methods. This procedure was used in Examples 1 to 10.

In Vivo Rhesus Monkey Test

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Male rhesus monkeys weighing 8-14 Kg were used 25 as the subject. An appropriate area of the monkey's chest was shaved 24 hours before drug application.

MCP HCl formulations were applied to a certain area of the chest. The monkey was restrained in a chair to prevent it from touching its chest.

8lood samples were taken at appropriate intervals after the application. The heparinized blood was centrifuged, and the plasma removed and stored at -20°C until analyzed.

MCP was analyzed following the HPLC method of Graffner, Lagerstrom and Lundborg, 8r. J. Clin. Pharmac. <u>8</u>, 469-474 (1979). The results are set forth in the following examples.

This test was used in Examples 12 to 15 and MCP was analyzed per the Graffner et al method in control Example 11.

Further in the following examples, the abbreviations below are used:

C₁₂OH - 1-dodecanol

- 1-methyl-2-pyrrolidone

- 1,2-propanediol PG

Unless otherwise indicated, in all of the examples the active agent was MCP·HCl, the MCP·HCl flux is given in terms of $ug/cm^2/8hrs$, 25 volume percent of the adjuvant with respect to the adjuvant plus solvent volume was used in combination with 2.5 weight percent of active agent based on the weight of the adjuvant plus solvent; otherwise, all percentages are by volume based on adjuvant, solvent or adjuvant plus solvent volume, depending on the system.

Compositions were prepared by merely mixing the adjuvant and solvent together, then mixing the MCP·HCl in the mixture and then, if used, mixing the dial therein. The order of mixing is not important.

Example 1 20

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This example shows the flux of MCP·HCl with combinations of various alcohols and 1-methyl-2-pyrrolidone.

	tions of various dis-	MCP·HC1 Flux(µg/cm²/8hrs)
	<u>Alcohol</u>	
	1-Octanol	3834
		3176
25	4-Octanol	4066
	Linalol	
	Oracosantol	2163
		4552
	1-Dadecanol Oleyl Alcahol	3287
30	2-Octyl-1-Dodecand	2176
30	Phytol	3040
		. 1410
	2-Decyl-1-Tetradecano	11

Example 2

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This example shows the use of 1-dodecanol as the adjuvant in combination with various pyrrolidone-type compounds as solvents. MCP·HCl was used as the active agent.

	<u>Combination</u>		MCP·HC1 Flux(µg/cm²/8hrs)
	25% C ₁₂ C	H in 2-Pyrralidone	2511
	25% C ₁₂ C	OH in 1-Methyl-2- pyrrolidone	4552
5	25% "	in 1-Ethyl-2- pyrrolidone	2841
	25 % " .	in 1-Butyl-2- pyrrolidane	2029
10	25% "	in 1,5-Dimethyl-2- pyrralidane	1533
	25% "	in 1-Methyl-2- piperidone	4031
	25% "	in 1-Methyl-caprolac- tam	2693

15 Example 3

This example shows the relative MCP·HCl flux with lower concentration of $\rm C_{12}^{OH}$ in MP compared to the flux with 25% $\rm C_{12}^{OH}$ in MP.

	<u>Combination</u>	Relative Flux
20	25% C ₁₂ OH in MP	as 1.0
t a	10% C ₁₂ 0H in MP	1.0
	5% C ₁₂ OH in MP	0.7
	1% C ₁₂ 0H in MP	0.6
	0% C ₁₂ OH in MP (MP alone)	0.1
25	'^(MP alone)	

Example 4

This example shows the use of MP as a solvent in combination with various esters as adjuvants and also with myristyl myristate (solid at 38° C) as a comparison study.

30	Combination	MCP·HC1 Flux(µg/cm²/8hrs)
•	25% Ethyl Caprylate in MP	2793
	25% Decyl Oleate in MP	2678
35	25% Myristyl Myristate in MP	117

Example 5

This example shows comparisons of the relative flux of MCP (free base) and its HCl salt with 25% C $_{12}^{\rm DH}$ in MP and 25% isopropyl myristate in MP.

•	rletion	Relative Flux
	<u>Formulation</u> : Free base	as 1.0
	25% 1-Dodecanol in MP : HCl Salt	1.3
	: Free base	1.0
5	25% isopropyl myristate : HC1 Salt	1.2

Example 6

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This example shows the effect of increasing the MCP HCl concentration in a 25% $C_{12}\,\mathrm{OH}$ in MP combination on MCP HCl flux. Flux increases linearly with increasing drug concentration, as shown in the results plotted in the accompanying drawing.

Example 7

This example shows the moderating effect of a diol on the system 25% $C_{12}\mathrm{DH}$ in MP and the system 25% decyl 15 oleate in MP.

	oleate in mr.	Relative Flux
	Formulation	as 1.00
20	25% C ₁₂ OH in MP 25% C ₁₂ OH in a 1/1 volume mixture of MP/1,2-Propanediol	0.30
	25% Decyl Oleate in MP	as 1.00
	25% Oecyl Oleate in a 1/1 volume mixture of MP/1,2-Propanediol	0.25

Example 8 25

This example shows the MCP·HC1 flux with various concentration of C_{12}^{OH} in a 1:1 volume mixture of MP : 1,2propanediol.

	propanediol	Relative Flux
	<u>Formulation</u>	0.1
30	C ₁₂ OH alone	1.7
	75% C ₁₂ OH in MP/1,2-Propanediol	1.3
	50% C ₁₂ OH in MP/1,2-Propanediol	as 1.0
	25% C ₁₂ OH in MP/1,2-Propanediol	1.0
	10% C ₁₂ OH in MP/1,2-Propanediol	0.0
35	mp/1,2-Propanediol alone	

Example 9

This example shows the moderating effect of a diol on the system 25% $\mathrm{C}_{12}^{\mathrm{OH}}$ in MP along with 2.23 weight percent of MCP (free base).

Formulation	<u>Relative Flu</u>		
25% C ₁₂ OH in MP	as	1.00	
25% C _{1.2} OH in MP/2,3-Butanediol=1/1	. •	0.35	
25% C ₁₂ OH in 2,3-Butanediol		0.05.	

Example 10 5

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500 mg of MCP·HCl was dissolved in 20 ml of 10% C_{12}^{OH} in MP. A 5 ml sample of the solution was added to 300 mg of hydroxy propyl cellulose (Klucel HF, Hercules Inc.) and to 300 mg of hydroxy ethyl cellulose (Natrosal 250H, Hercules Inc.). Uniform gel formulations These formulations were added to diffusion cells and the MCP·HCl flux for 8 hours was measured.

	Formulation	MCP·HC1 Flux(µg/cm²/8hrs)
	Hydroxy ethyl cellulose	1296
15	Hydroxy propyl cellulose	843

Example 11

This control study shows the in vivo MCP·HCl plasma level in a rhesus monkey after oral administration of MCP·HCl (Reglan Tab., A.H. Robins Co.) and intravenous injection thereof (Reglan Injectable, A.H. Robins Co.).

20 mg Oral Administration:

Time after application	301	1hr	2hrs	3hrs.	5hrs	7hrs
MCP·HC1 plasma level (ng/ml)	8	19	7	5	5	3

Intravenous Injection 25

7.	me after ap	alicat	ion	10'	201	40!	60'	90'	2hrs	3hrs	Shrs	7hrs	
11			injec.						61	32	17	10 .	
P1 (n	asma level		11	378			_		93	45	40	28	

Example 12 30

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This example shows the <u>in vivo</u> MCP·HCl plasma level in a rhesus monkey resulting from the use of a topical gel formation of MCP·HCl as described below. 150 mg of MCP·HCl was dissolved in 3 ml of C_{12}^{OH} in MP. To this solution was added 90 mg of Klucel (type HF). A uniform gel was obtained. 0.5 ml of the gel was placed in a polyester cup having 4 $\rm cm^2$ opening and a volume of 0.5 ml. The gel in the cup was applied on the monkey chest as earlier described.

Time after application 1hr 3hrs 7hrs

Plasma level (ng/ml) 117 65 72

Example 13

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This example shows the <u>in vivo</u> MCP·HCl plasma level obtained in a rhesus monkey with a topical gel formulation as described below. 200 mg of MCP·HCl was dissolved in 4 ml of 25% decyl oleate in MP. To this solution was added 160 mg of Klucel (type HF) and the system was stirred thoroughly to obtain a uniform gel. 1.0 ml of the gel was applied to a 49 cm² chest area of a rhesus monkey and the applied area was open to the air for the duration of the experiment.

(ng/ml of Plasma)

1 hr	2 hrs	3 hrs	5 hrs	7 hrs
5	13	23	32	22

20 Example 14

200 mg MCP·HCl was dissolved in 4 ml of 25% $C_{12}^{\,\,\text{OH}}$ in 1/1 volume mixture of MP/1,2-propanedial. To this solution was added 1.2 g of polyvinyl pyrrolidone K-90 (molecular weight: 36,000) and the system stirred to obtain a viscous solution. 0.5 ml of this solution was placed in a polyester cup having a 4 cm² opening and a volume of 0.5 ml. The solution in the cup was applied to the chest of a rhesus monkey and attached thereto with adhesive.

(ng/ml of Plasma)

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(1.9)		·
1 hr	3 hrs	7 hrs
5	10	20

Example 15

200 mg of MCP·HCl was dissolved in 4 ml of 10% C₁₂0H

in a 1/1 volume mixture of MP/1,2-propanediol. To this solution was added 160 mg of Klucel and the system stirred to obtain a uniform gel. 1.0 ml of the gel was applied to a 49 cm 2 area on the rhesus monkey chest and the applied area was left open to the air.

ng/ml of Plasma

1 hr 2 hrs 3 hrs 5 hrs 7 hrs 75 146 178 121 93

The term "Klucel" used in Examples 10, 12, 13 and 15 is a registered Trade Mark.

1. A pharmaceutical composition suitable for percutaneous administration, which comprises metoclopramide dissolved in a carrier system which comprises a mixture liquid at below 38°C , of

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- (a) at least one monovalent alcohol ester of an aliphatic monocarboxylic acid which ester has 8 to 32 carbon atoms, wherein the carboxylic acid moiety must have at least one unsaturated bond and/or at least one branched chain if the moiety has 18 or more carbon atoms, an alphatic mono-alcohol having 6 to 24 carbon atoms and which must contain at least one unsaturated bond and/or at least one branched chain if it has 14 or more carbon atoms, or a mixture thereof, and
- 15 (b) at least one N-cyclic compound of the general formula

$$R_5 - N$$
 C
 R_6
 CH_2
 R_6

wherein R_5 represents a hydrogen atom or an alkyl group having 1 to 4 carbon atoms, R_6 represents an alkyl group having 1 to 4 carbon atoms and n is 3, 4 or 5.

- 2. A composition as claimed in Claim 1, wherein the liquid mixture comprises 0.5 to 95 weight% of component (a) and 99.5 to 5 weight% of component (b).
- A composition as claimed in Claim 1 or 2, wherein
 in an ester (a) the acid moiety has 2 to 20 carbon atoms.
 - 4. A composition as claimed in Claim 3, wherein the acid moiety has 8 to 18 C atoms.
 - 5. A composition as claimed in any preceding claim, which also includes a diol having 3 to 6 carbon atoms.

- 6. A composition as claimed in Claim 5, wherein the diol is present in an amount of 10 to 400 weight percent of the component (b).
- 7. A composition as claimed in any preceding claim, together with additional carrier components to form a solution, ointment, lotion, adhesive tape, or incorporated into an absorbent vehicle.

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A pharmaceutical composition as claimed in Claim
 substantially as hereinbefore described with reference
 to any of the foregoing Examples.